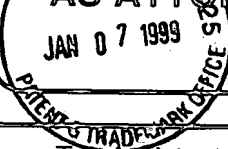


**REQUEST FOR WITHDRAWAL  
AS ATTORNEY OR AGENT**

JAN 07 1999



Application Number	09/133886
Filing Date	08/13/98
First Named Inventor	James Johnson
Group Art Unit	Unassigned
Examiner Name	Unassigned
Attorney Docket Number	10172-9013-009

To: Assistant Commissioner for Patents  
Washington, DC 20231

I hereby apply to withdraw as attorney or agent for the above identified application.

The reasons for this request are:

BUSINESS WAS TRANSFERRED TO ILLINOIS TOOL WORKS, INC.

1. ☐ The correspondence address is NOT affected by this withdrawal.  
2. ☒ Change the correspondence address and direct all future correspondence to:

**CORRESPONDENCE ADDRESS**☐

Customer Number

Place Customer Number  
Bar Code Label here

OR

☐Firm or  
Individual Name

ILLINOIS TOOL WORKS, INC.

Address

MR. THOMAS BUCKMAN

Address

3600 W. LAKE AVENUE

City

GLENVIEW

State

IL

ZIP

60025

Country

COOK

Telephone

847-724-7500

Fax

This request is enclosed in triplicate.

Name

ROBERT S. BEISER OF MICHAEL, BEST &amp; FRIEDRICH

Signature

Date

DECEMBER 28, 1998

*NOTE: Withdrawal is effective when approved rather than when received.  
Unless there are at least 30 days between approval of withdrawal and the expiration date of a time  
period for response or possible extension period, the request to withdraw is normally disapproved.*

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

**RECEIVED**

JAN 15 1999

**GROUP 1700**